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MILWAUKEE COUNTY EMS STANDARD OF CARE ASSESSMENT PARAMETERS

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Assessment	Likely History	Usual Signs/Symptoms	NOTES:
Respiratory	Asthma	Difficulty breathing	Lung/breath sounds are described and documented as clear, wet, decreased, absent,
Problem	COPD	Increased or decreased respiratory rate	wheeze, or congested
	Chronic bronchitis	Increased or decreased respiratory effort	Respiratory effort is described and documented as normal, increased effort, decreased effort, or
	Recent respiratory infection	Abnormal breath sounds; retractions, nasal flaring	absent.
	CHF	Grunting, stridor, drooling, pursed lip breathing	
		Short word strings	
Cardiac	MI	Chest pain with or without associated symptoms	Heart tones are described and documented as present, absent, or muffled.
Problem	Arrhythmia	Absent or muffled heart tones	Pulses are described and documented as full, weak, regular, irregular, or absent.
	CHF	Weak, irregular, or absent pulses	Blood pressures should be auscultated whenever possible, palpated only when necessary.
	CVA/TIA	Hypertension or hypotension	Skin temperature is described and documented as normal, hot, cool, diaphoretic, pale,
	Hypertension	Abnormal single or 12 lead ECG	flushed, cyanotic, jaundiced, or dehydrated.
	Trypertension	Prolonged capillary refill time; jugular vein distention	Pitting edema is the presence of a "pit" still visible after a finger is removed from an
		Abnormal skin temperature or color	indentation made with that finger into the tissue.
		Dehydration or edema	
N	O) / A /T! A	, , , , , , , , , , , , , , , , , , ,	Note any cardiac medications the patient may be taking to help establish history.
Neurologic	CVA/TIA	Altered level of consciousness	Consider ALS transport to the Trauma center for any patient with any of the above symptoms due to
Problem	Diabetic complications	Disoriented	traumatic injury.
	Recent trauma	Inability to follow commands	
	Coma	Pupils unequal, unreactive, pinpoint or dilated	
		Paralysis, numbness, weakness, or absence of peripheral	
		circulation, sensation or movement	
Musculo-	Recent trauma	Pain	Patients with two or more long bone (humerus, femur) fractures require ALS transport to the Trauma
Skeletal	Arthritis	Decreased range of motion	Center.
Problem	Chronic back pain	Paralysis, numbness, weakness or absence of peripheral	
	Spinal/disc problems	circulation, sensation or movement change in normal	
	Recent surgery	tissue color or temperature	
		Deformity, crepitus, soft tissue injury	
		Swelling	
Abdominal	Ulcers	Pain	
problem	Obstruction	Nausea, vomiting, fever	
	Recent surgery	Change in elimination patterns	
	Renal disease	Guarding, rigidity	
	Liver disease	Hematemesis, melena	
	Pancreatic disease	Distention	
Gynecologic	Previous surgery	Pain	
problem	Gynecologic problems/infection	Vaginal bleeding, discharge	
p. 00.0	Pregnancies - live	3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	
	births/complications		
	Last menstrual period		
Labor	Pregnancies	Pain/cramping	Patients experiencing complicated childbirth with any of the following must be transported by ALS:
Laboi	Prenatal care	Ruptured membranes	excessive bleeding, amniotic fluid contaminated by fecal material, multiple births, premature imminent
	Toxemia	Crowning	delivery, abnormal fetal presentation (breech), prolapsed umbilical cord, newborn with a pulse less
Pre-eclampsia	Ectopic pregnancy	Vaginal bleeding	than 140, flaccid newborn or with a poor cry.
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Toxemia	Abortion - spontaneous/induced	Hypertension with or without seizures	
	Last menstrual period		